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**Increased cerebrospinal fluid tau protein in multiple sclerosis.****Kapaki E, Paraskevas GP, Michalopoulou M, Kilidireas K.**

Department of Neurology, Medical School, University of Athens, 'Aeginition' Hospital, Athens, Greece.

Axonal damage is now being recognized as a common finding in multiple sclerosis (MS) lesions and a cause of irreversible neurological damage. Attempts to identify markers of early axonal damage are of great significance. This prompted us to examine the microtubule-associated protein tau in the cerebrospinal fluid (CSF) of patients with MS vs. controls. Tau was measured by double antibody sandwich ELISA. Increased CSF tau levels were found in MS as compared to controls (medians 249.6 and 135 pg/ml respectively,  $p < 0.001$ ). Half of the MS patients presented with levels above the upper limit of the controls. A significant increase vs. controls was found in both relapsing-remitting and progressive subtypes. These data may indicate axonal impairment in a subpopulation of MS patients and may provide a tool for the estimation of axonal damage during life. Copyright 2000 S. Karger AG, Basel.

PMID: 10828654 [PubMed - indexed for MEDLINE]

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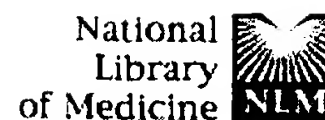
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1: Neurosci Lett 1997 Dec 5;238(3):139-41

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FULL-TEXT ARTICLE

## Tau protein concentrations in cerebrospinal fluid of non-demented Parkinson's disease patients.

Molina JA, Benito-Leon J, Jimenez-Jimenez FJ, Orti-Pareja M, Berbel A, Tallon-Barranco A, de Bustos F, Hernanz A.

Department of Neurology, Hospital Universitario Doce de Octubre, Madrid, Spain.

We measured total tau protein concentrations in the cerebrospinal fluid (CSF) of 26 non-demented Parkinson's disease (PD) patients and 25 matched controls. When compared with controls, PD patients had similar CSF tau protein concentrations. These values were not correlated with age, age at onset of PD, duration of PD, scores of the Unified PD Rating Scale (UPDRS), and the Hoehn and Yahr staging, and were not influenced significantly by antiparkinsonian drugs. Our results suggest that CSF tau protein levels are apparently unrelated to the risk of PD.

PMID: 9464639 [PubMed - indexed for MEDLINE]

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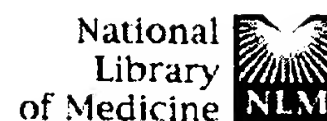
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## Cerebrospinal fluid tau protein is not elevated in HIV-associated neurologic disease in humans. HIV Neurobehavioral Research Center Group (HNRC).

Ellis RJ, Seubert P, Motter R, Galasko D, Deutsch R, Heaton RK, Heyes MP, McCutchan JA, Atkinson JH, Grant I.

Department of Neurosciences, University of California, San Diego, USA.  
roellis@ucsd.edu

We measured the concentrations of the neuron-specific protein, tau, in the cerebrospinal fluid (CSF) of 32 neurologically characterized HIV-infected (HIVpos) subjects and nine matched seronegative (HIVneg) controls using a sensitive ELISA assay. Of 32 HIVpos subjects, nine had HIV-associated neurocognitive disorders, and nine had clinically diagnosed peripheral neuropathies. CSF tau levels in subjects with HIV-associated neurocognitive disorders were similar to those in HIVneg subjects ( $185 \pm 83$  vs.  $223 \pm 106$  pg/ml;  $P = 57$ ). CSF tau levels in HIVpos subjects with peripheral neuropathies did not differ from those without neuropathies ( $320 \pm 190$  vs.  $251 \pm 185$ ;  $P = 23$ ). In summary, CSF tau levels were not elevated in patients with HIV-associated neurologic disease.

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1: Neurosci Lett 2001 Mar 9;300(2):95-8

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## Tau protein in cerebrospinal fluid (CSF): a blood-CSF barrier related evaluation in patients with various neurological diseases.

**Sussmuth SD, Reiber H, Tumani H.**

Department of Neurology, University of Ulm, Germany.

Tau protein (tau) is primarily localised in neurons, and after brain parenchymal damage its release into cerebrospinal fluid (CSF) is increased. The particular influences of blood-CSF barrier function and of disease topography on CSF tau levels have not been studied yet. CSF tau concentrations determined by enzyme-immunoassay in various neurological diseases (n = 61) were not dependent upon blood-CSF barrier dysfunction. Significant elevation of tau levels in patients with meningoencephalitis and cerebral hemorrhage indicates brain parenchymal damage. In contrast, tau levels remained normal in patients with bacterial meningitis if encephalitic complications did not occur. In patients with Guillain-Barre syndrome tau levels were low. Increased tau levels in active multiple sclerosis compared to clinically nonactive states indicate axonal pathology in active disease.

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